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1109 7590 09/27/2005

ANDERSON, KILL & OLICK, P.C.
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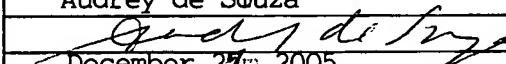
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Audrey de Souza	(Depositor's name)
	
December 27, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/718,734	11/20/2003	Nam-Tae Woo	DE-1539	1826

TITLE OF INVENTION: PORPHYRIN DERIVATIVES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	12/27/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
FEDOWITZ, MATTHEW L	1623	540-145000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 ANDERSON KILL & OLICK, PC

2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

KOSTARWORLD CO., LTD.

Korea

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-1944 (enclose an extra copy of this form).

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Date December 27, 2005

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